## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

GLC OCUZ

CLAIMS AS FILED - PART I							S	SMALL ENTITY			OTHER THAN	
			(Column 1)		_(Colur	(Column 2)		TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			i					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBE	ER EXTRA	E	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20= *		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 = *		*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L	TOTAL	320	OR	TOTAL	
CLAIMS AS AMENDED - PART II								•	- "	•	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 2/	Minus	* 2	//			X\$ 9=		OR	X\$18=	
	Independent	* 3 NTATION OF MU	Minus	***	5			X42=		OR	X84=	
	FIRST PRESE	NIATION OF MO	JUNIPLE DEF	PENDEN	CLAIM			+140=		OR	+280=	
							L.	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2\	(Column 3)	Al	JUII. FEE			ADDIT: TEE	
		CLAIMS		HIGH		(Column 3)		<del></del>	ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	T CL AIM	=		X42=		OR	X84=	
<b>L</b>	FIRST PRESE	INTATION OF MIC		LINDLIN	CLAIN		1	+140=		OR	+280=	:
							L ^!	TOTAL ODIT FEE		OR	TOTAL ADDIT FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		JUIT 1 EE .	•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T O1 A114	=		X42=		OR	X84=	
╙	FIRST PRESE	NTATION OF M	ULTIPLE DEI	-ENDEN	I CLAIM		╵├	+140=		OR	+280=	
	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2. writ	e "0" ın col	umn 3	L	TOTAL			TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	iber Previously Pa	id For" (Total o	r Independ	dent) is the	highest numbe	er foun	id in the app	propriate box	x in co	łumn 1.	